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3 Westchester Plaza, Elmsford, NY 10523  
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**TO: USPTO**

**FROM: Bosco Kim**  
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**FAX #: 703 872-9306**

**FAX #: 914-345-9558**

**DATE: December 15, 2004**

**# OF PAGES: 4 (including this**  
**cover)**

**RE: US Patent Application Serial No. 10/045,901 (VREX-0035)**

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<b>TRANSMITTAL FORM</b>	Application No.	10/045,901
	Filing Date	January 14, 2002
	First Named Inventor	Adam Divelbiss
	Art Unit	2872
	Examiner	Chang, Audrey Y.
Total Number of Pages in This Submission: 3		Attorney Docket Number Vrex-0035

ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declarations <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Notice of Non-Compliant Amendment <input type="checkbox"/> Response to Restriction Requirement <input checked="" type="checkbox"/> Request for Continued Examination	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
<table border="1"> <tr> <td>REMARKS</td> </tr> </table>			REMARKS
REMARKS			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Bosco B. Kim
Signature	
Date	December 15, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or Printed Name	Bosco B. Kim		
Signature		Date	December 15, 2004

Attorney Docket No. VREX-0035

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Divelbiss, et al. )  
SERIAL NO.: 10/045,901 ) Group Art Unit  
FILING DATE: January 14, 2002 ) 2872  
FOR: METHOD AND APPARATUS FOR ) Examiner  
STEREOSCOPIC DISPLAY USING ) Chang, Audrey Y.  
COLUMN INTERLEAVED DATA WITH  
DIGITAL PROCESSING

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Commissioner for Patents  
P.O. Box 1450  
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REQUEST FOR CONTINUED EXAMINATION

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

## I. Submission required under 37 CFR 1.114

- (a) ☒ Previously Submitted  
(i) ☒ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on **October 25, 2004**.  
(ii) ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on .  
(iii) ☐ Other .  
(b) ☐ Enclosed  
(i) ☐ Amendment/Reply.  
(ii) ☐ Affidavit(s)/Declaration(s).  
(iii) ☐ Information Disclosure Statement (IDS).  
(iv) ☐ Other .

## II. Miscellaneous

- (a) ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of        months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required).  
(b) ☐ Other .

Attorney Docket No. VREX-0035

III. Applicant is a Small Entity. Fees:

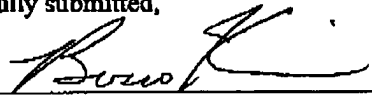
- (a) ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. **501648**.
- (i) ☒ RCE fee required under 37 CFR 1.17(e) (\$395).
- (ii) ☐ Extension of time fee (37 CFR 1.136 and 1.17) (\$55 for one month extension).
- (iii) ☐ Other .

Total fees to be charged to Deposit Account No. **501648**: **\$395**.

- (b) ☐ Check in the amount of \$        enclosed.

Respectfully submitted,

By: \_\_\_\_\_

  
Bosco B. Kim  
Registration No. 41,896

Date: December 15, 2004  
REVEO, INC.  
3 Westchester Plaza  
Elmsford, New York 10523  
Telephone (914) 345-9555  
Facsimile: (914) 345-9558

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